

EXHIBIT T

Bureau of Prisons
Health Services
Clinical Encounter

Inmate Name: GEORGESCU, FLAVIU VIRGIL
Date of Birth: [REDACTED]/1972
Encounter Date: 08/18/2016 09:38

Sex: M Race: WHITE
Provider: Bialor, Bruce MD

Reg #: [REDACTED]
Facility: BRO
Unit: J02

Physician - Follow up Visit encounter performed at Health Services.

SUBJECTIVE:

COMPLAINT 1 **Provider:** Bialor, Bruce MD

Chief Complaint: NEUROLOGY

Subjective: Was taken to ER 8/15, because of LUE, LLE, and L facial numbness and weakness, starting around 1030. Had extensive W/U for stroke, including CT's, MRI's and MRA's, all of which showed no acute stroke or stenoses. MRI did show scattered foci of T2 prolongation in supratentorial brain plus brainstem, which are nonspecific.

Sx's from 8/15 resolved within 2 days. Had similar episode on R side in 2010, in Romania. That's when the lesions in the brain were 1st discovered; 6 on the R side; 5 in the back. 2010 episode resolved in 4 days.

Has trouble with learning new things. Has trouble writing in English, and states that English-language skills have declined, over the last 6 yrs. Sporadically misplaces items, though not every day. Has trouble with balance when 1st getting OOB in AM, and sporadically veers to his L while walking. When going upstairs, has to lean forward to keep himself from falling backwards.

Pain: Took Fosamax X 1 yr.; BMD did not improve. Was advised to not take it because of risk of esoph CA. 7/21/15 BMD showed T=-2.5 in L-Spine, and -1.2 in L Hip.

Pain: No

OBJECTIVE:

Temperature:

| <u>Date</u> | <u>Time</u> | <u>Fahrenheit</u> | <u>Celsius</u> | <u>Location</u> | <u>Provider</u> |
|-------------|-------------|-------------------|----------------|-----------------|------------------|
| 08/18/2016 | 09:38 BRO | 97.6 | 36.4 | Oral | Bialor, Bruce MD |

Pulse:

| <u>Date</u> | <u>Time</u> | <u>Rate Per Minute</u> | <u>Location</u> | <u>Rhythm</u> | <u>Provider</u> |
|-------------|-------------|------------------------|-----------------|---------------|------------------|
| 08/18/2016 | 09:38 BRO | 64 | Radial | Regular | Bialor, Bruce MD |

Respirations:

| <u>Date</u> | <u>Time</u> | <u>Rate Per Minute</u> | <u>Provider</u> |
|-------------|-------------|------------------------|------------------|
| 08/18/2016 | 09:38 BRO | 20 | Bialor, Bruce MD |

Blood Pressure:

| <u>Date</u> | <u>Time</u> | <u>Value</u> | <u>Location</u> | <u>Position</u> | <u>Cuff Size</u> | <u>Provider</u> |
|-------------|-------------|--------------|-----------------|-----------------|------------------|------------------|
| 08/18/2016 | 09:38 BRO | 109/74 | Right Arm | Sitting | Adult-regular | Bialor, Bruce MD |

SaO2:

| <u>Date</u> | <u>Time</u> | <u>Value(%)</u> | <u>Air</u> | <u>Provider</u> |
|-------------|-------------|-----------------|------------|------------------|
| 08/18/2016 | 09:38 BRO | 98 | Room Air | Bialor, Bruce MD |

Weight:

| <u>Date</u> | <u>Time</u> | <u>Lbs</u> | <u>Kg</u> | <u>Waist Circum.</u> | <u>Provider</u> |
|-------------|-------------|------------|-----------|----------------------|------------------|
| 08/18/2016 | 09:38 BRO | 174.0 | 78.9 | | Bialor, Bruce MD |

Exam:

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Exam:**Diagnostics****Laboratory**

Yes: Results

Radiology

Yes: Results

General**Affect**

Yes: Pleasant, Cooperative

Appearance

Yes: Appears Well

No: Appears Distressed

Nutrition

Yes: Within Normal Limits

Head**General**

Yes: Atraumatic/Normocephalic

No: Facial Asymmetry

Eyes**General**

Yes: PERRLA, Extraocular Movements Intact

Conjunctiva and Sclera

No: Conjunctival Injection, Diffuse Redness, Discharge, Icteric

Nose**General**

Yes: Nares Patent

No: Mucoid Discharge, Purulent Discharge, Clear Discharge

Mouth**Mucosa**

No: Ulceration(s), Erythema, White Plaques, Dryness

Pharynx

Yes: Uvula Midline

No: Tonsilar Exudate, Erythema, Tonsilar Hypertrophy

Neck**General**

Yes: Supple, Symmetric

No: Growth/Mass(es), Lymphadenopathy

Thyroid

No: Diffuse Enlargement, Nodule, Tenderness

Pulmonary**Auscultation**

Yes: Clear to Auscultation

Cardiovascular**Auscultation**

Yes: Regular Rate and Rhythm (RRR), Normal S1 and S2

No: M/R/G

Peripheral Vascular

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Exam:**General**

No: Non-Pitting Edema, Pitting Edema

Abdomen**Auscultation**

Yes: Normo-Active Bowel Sounds

Palpation

Yes: Soft

No: Guarding, Rigidity, Tenderness on Palpation, Rebound Tenderness, Mass(es)

Neurologic**Cranial Nerves (CN)**

Yes: CN 2-12 Intact Grossly

ROS Comments

As per HPI.

Exam Comments

8/15/16 Lab and Radiology reports were reviewed.

Neuro: Motor 5/5 B/L UE's and LE's. L facial droop resolved.

ASSESSMENT:

Osteoporosis, unspecified, 733.00 - Current - *Amenable to trying Ca Citrate supplement.*

Disorder of brain, unspecified, G939 - Current - *Hx and MRI are suspicious for MS. Will ask Neuro to address this at their next visit. EEG to be re-ordered.*

PLAN:**New Medication Orders:**

| <u>Rx#</u> | <u>Medication</u> | <u>Order Date</u> | <u>Prescriber Order</u> |
|------------|-----------------------|-------------------|---|
| | Calcium Citrate/VIT D | 08/18/2016 09:38 | 315 mg/250 U (2 tabs) Orally Mouth - Two Times a Day x 180 day(s) -- Take with meals. |

Indication: Osteoporosis, unspecified

New Laboratory Requests:

| <u>Details</u> | <u>Frequency</u> | <u>Due Date</u> | <u>Priority</u> |
|--|------------------|------------------|-----------------|
| Lab Tests-L-Lyme Disease Antibodies | One Time | 08/19/2016 00:00 | Routine |
| Lab Tests-P-Phosphorus | | | |
| Lab Tests-V-Vitamin D, 25-Hydroxy | | | |
| Lab Tests - Short List-General-Comprehensive | | | |
| Metabolic Profile (CMP) | | | |

New Consultation Requests:

| <u>Consultation/Procedure</u> | <u>Target Date</u> | <u>Scheduled Target Date</u> | <u>Priority</u> | <u>Translator</u> | <u>Language</u> |
|-------------------------------|--------------------|------------------------------|-----------------|-------------------|-----------------|
| | | | | | |

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| | | | | |
|---------------|------------|------------|---------|----|
| Endocrinology | 11/01/2016 | 11/01/2016 | Routine | No |
|---------------|------------|------------|---------|----|

Subtype:

Endocrinology

Reason for Request:

44 yr old male with PMH of osteoporosis, VIT D deficiency, Hyperlipidemia seen by Endocrinologist
 05/03/16, follow up in 6 months advised. Appt Nov 1, 2016 @ 12:45 pm

Provisional Diagnosis:

Osteoporosis; VIT D deficiency; Hyperlipidemia.

| | | | | |
|-----------|------------|------------|---------|----|
| Neurology | 09/19/2016 | 09/19/2016 | Routine | No |
|-----------|------------|------------|---------|----|

Subtype:

EEG - Standard Electroencephalogram

Reason for Request:

White-Matter Disease on MRI: 44-yo male being F/U'd by Neurology for the above condition. EEG requested by Neurology, prior to the next appt in early October.

Provisional Diagnosis:

White-Matter Disease on MRI.

| | | | | |
|-----------|------------|------------|---------|----|
| Neurology | 10/05/2016 | 10/05/2016 | Routine | No |
|-----------|------------|------------|---------|----|

Subtype:

Neurology - Offsite Appt

Reason for Request:

White-Matter Disease on MRI: 44-yo male being F/U'd by Neurology for the above condition. Last saw Neurology 7/5/16; 3-month F/U requested. He did not want to start Depakote after last Neuro visit. Pt had episode of LLE, LUE, and L facial numbness and weakness on 8/15/16; W/U in ER was (-)ve for acute stroke.

Has various intermittent neurologic sx's. IT WOULD BE GREATLY APPRECIATED IF NEUROLOGIST WOULD SPECIFICALLY ADDRESS THE POSSIBILITY OF PT HAVING MULTIPLE SCLEROSIS, AND WHETHER OR NOT LUMBAR PUNCTURE IS INDICATED. LAST MRI DID NOT SHOW ATROPHY; THEREFORE, I DO NOT SUSPECT DEMENTIA AS THE CAUSE OF HIS SYMPTOMS.

Provisional Diagnosis:

White-Matter Disease on MRI.

Discontinued Consultation Requests:

| <u>Consultation/Procedure</u> | <u>Target Date</u> | <u>Scheduled Target Date</u> | <u>Priority</u> | <u>Translator</u> | <u>Language</u> |
|-------------------------------|--------------------|------------------------------|-----------------|-------------------|-----------------|
| Neurology | 10/04/2016 | 10/04/2016 | Routine | No | |

Subtype:**Reason for Request:**

Inmate seen in Neurology clinic, requires follow up in 3 months, inmate needs EEG prior to appointment

Provisional Diagnosis:

FOR ELECTROENCEPHALOGRAPH. PATIENT IS IN THE PROCESS OF BEING WORKED UP FOR DEMENTIA.

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| | | | | |
|-------------------------------|------------|------------|---------|--|
| Endocrinology | 11/01/2016 | 11/01/2016 | Routine | No |
| Subtype: | | | | |
| Reason for Request: | | | | |
| | | | | 43 yr old male with PMH of osteoporosis, VIT D deficiency, HLDH seen by Endocrinologist 05/03/16, follow up in 6 months advised. Appt Nov 1, 2016 @ 12:45 pm |
| Neurology | | | | |
| | 07/05/2016 | 07/05/2016 | Routine | No |
| Subtype: | | | | |
| Reason for Request: | | | | |
| | | | | 43 yr old male with PMH of osteoporosis, VIT D deficiency, HLDH seen by Neurologist 05/03/16, follow up in 2 months advised. Appt. 07/05/16 @ 2:00 pm |
| Provisional Diagnosis: | | | | |
| RULE OUT EARLY DEMENTIA | | | | |

Disposition:

- Follow-up at Sick Call as Needed
- Follow-up at Chronic Care Clinic as Needed
- Return Immediately if Condition Worsens

Other:

Because of recurring episodes of various neurologic sx's, including memory lapses, Neuro recommended low-dose Depakote, which he refused. Since the 8/15 episode may also have been a seizure, recommended he reconsider Depakote. He prefers to obtain EEG 1st.

In addition to MS, need to R/O Lyme Dz.

F/U next month (already scheduled).

Patient Education Topics:

| Date Initiated | Format | Handout/Topic | Provider | Outcome |
|----------------|------------|-------------------------|---------------|--------------------------|
| 08/18/2016 | Counseling | New Medication | Bialor, Bruce | Verbalizes Understanding |
| 08/18/2016 | Counseling | Medication Side Effects | Bialor, Bruce | Verbalizes Understanding |
| 08/18/2016 | Counseling | Plan of Care | Bialor, Bruce | Verbalizes Understanding |
| 08/18/2016 | Counseling | Compliance - Treatment | Bialor, Bruce | Verbalizes Understanding |

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Bialor, Bruce MD on 08/18/2016 18:27